

# BEST AVAILABLE COPY

<b>CLAIMS ONLY</b>							SERIAL NO. <div style="font-size: 1.2em; font-family: cursive;">09883026</div>	FILING DATE	
							APPLICANT(S)		
CLAIMS									
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT				
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.
1	1						51		
2		1					52		
3		1					53		
4		1					54		
5	1						55		
6		1					56		
7		1					57		
8		1					58		
9		1					59		
10		1					60		
11		1					61		
12		1					62		
13		1					63		
14		1					64		
15		1					65		
16		1					66		
17		1					67		
18		1					68		
19		1					69		
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41							91		
42							92		
43							93		
44							94		
45							95		
46							96		
47							97		
48							98		
49							99		
50							100		
TOTAL IND.	3	↓		↓		↓	TOTAL IND.	↓	↓
TOTAL DEP.	16	←		←		←	TOTAL DEP.	←	←
TOTAL CLAIMS	19						TOTAL CLAIMS		

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS